

11-16-04

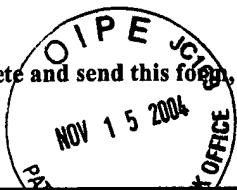
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Complete and send this form, together with applicable fee(s), to: **Mail**

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040990 7590 11/03/2004

**ACUSHNET COMPANY**  
**333 BRIDGE STREET**  
**P. O. BOX 965**  
**FAIRHAVEN, MA 02719**

11/17/2004 TBESHAH2 00000063 502309 10797793 8627US

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D. Michael Burns

(Depositor's name)

(Signature)

11-15-2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/797,793	03/10/2004	Christopher B. Best	C04-02	4506

## TITLE OF INVENTION: SET OF GOLF CLUB IRONS

11/17/2004 TBESHAH2 00000063 10797793

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APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	02/03/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BLAU, STEPHEN LUTHER	3711	473-291000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	<u>1 D. Michael Burns</u> <u>2</u> <u>3</u>
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## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

Acushnet Company

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Fairhaven, MA

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

## 4a. The following fee(s) are enclosed:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies \_\_\_\_\_

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A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 502309 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date 11-15-2004

Typed or printed name D. Michael Burns

Registration No. 38,400

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